

FEC
FORM 1STATEMENT OF
ORGANIZATIONRECEIVED
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OPERATIONS CENTER

2003 OCT 16 A 10:59

Open the Day

1. NAME OF
COMMITTEE (in full)(Check if name
is changed)Example: If typing, type
over the lines.

12FE4MS

[New Jersey First]

ADDRESS (number and street)

Riverfront Plaza Station

P.O. Box 20,0597

[Newark]

[N.J.]

[07102-0310]

CITY []

STATE [A]

ZIP CODE [A]

COMMITTEE'S E-MAIL ADDRESS

[]

COMMITTEE'S WEB PAGE ADDRESS (URL)

[]

COMMITTEE'S FAX NUMBER

[973-6391-19710]

2. DATE [10/01/2003]

3. FEC IDENTIFICATION NUMBER ► [C]

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Vincent P. Rigolosi

Signature of Treasurer

Date

[10/01/2003]

[]

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only				
FEC FORM 1 (Revised 02/2003)				

For further information contact:
Federal Election Commission
Toll Free: 800-434-2620
Local: 202-292-4100FEC FORM 1
(Revised 02/2003)